

## TOWN OF LOS GATOS, PARKS & PUBLIC WORKS DEPT.

41 MILES AVE. LOS GATOS, CA 95030 (408) 399-5771 FAX: (408) 399-5763

WWW.LOSGATOSCA.GOV

## **ENCROACHMENT PERMIT APPLICATION**

| Application Date:  Project Address:   |   | Permit No. <b>EN</b> A.P.N.:                                   |  |
|---|---|--|--|
|   |   |  |  |
| Loc   | ation of Work (if not at address frontage):                       |  |  |
| Cost of Work in the Public Right-of-Way (Required):                                   |   | Depth of Trench:   |  |
| Estimated Date of Completion of Work:   |   | Your Job #   |  |
| <u>AD</u>   | DITIONAL INFORMATION:   |  |  |
| 1.  | Property Owner/Applicant (circle one):                            |  |  |
|   | Name:   | E-mail:  |  |
|   | Address:  | Phone:   | Fax:   |
|   | City:   | State:   | Zip:   |
| 2.  | General Contractor in charge of work at the site:  Name:          | Town Business I Class: Phone: State: eve Souza, Sr. Engineerir | Exp. Date:  Fax:  Zip:  g Inspector at (408) 395-3430. All work in the |
|   | Encroachments. (It may take up to 10 working days to process this | application)   |  |
| SIG   | NATURE OF OWNER (REQUIRED):                                       | Date:  |  |
| Print Name:   |   | Title:   |  |
|   |   | Date:  |  |
| Print Name:   |   | Title:   |  |
| FOR OFFICIAL USE ONLY: Indemnity Agreement Required: Yes No (circle one) Approved by: |   | Date Ret   | urned:   |
|   |   | Date:  |  |